



UNITED STATES PATENT AND TRADEMARK OFFICE

QUOC TRAN
PRIMARY EXAMINER

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4979

SERIAL NUMBER 10/823,992	FILING DATE 04/14/2004 RULE	CLASS 379	GROUP ART UNIT 2614	ATTORNEY DOCKET NO. 8285/677
-----------------------------	---------------------------------------	--------------	------------------------	---------------------------------

APPLICANTS

Scott P. Alcott, Oak Park, IL;
Thomas L. Linton, Lake-In-The-Hills, IL;
Diane I. Primo, Chicago, IL;

**** CONTINUING DATA *******

This application is a CON of 10/274,617 10/21/2002 PAT 6,748,062
which is a CON of 09/888,946 06/25/2001 PAT 6,498,840
which is a CON of 09/304,944 05/04/1999 PAT 6,252,951
which is a CON of 08/846,155 04/25/1997 PAT 5,881,138
and is a CON of 08/845,173 04/25/1997 PAT 5,920,613

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 06/23/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 7	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS
00757
BRINKS HOFER GILSON & LIONE
P.O. BOX 10395
CHICAGO , IL
60610

TITLE
Method and system for generating a billing record

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit